KREF 006/P	1. PAC Name:	3. This Statement Covers:  From: Month - Day - Year  To: Month - Day - Year	
KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601 (502) 573-2226 FAX (502) 573-5622  DISBURSEMENTS SCHEDULE 2	KY Registration Number: (Identification Number)		
Name, Address and Occupation of person to whom paid.     (If over \$25.00, disbursement must be made by check.)	5. Purpose. (Be specific) (If \$25.00 or less, show purpose, date and amount.) Beneficiary of expenditure, if other than PAC, must be listed.	6. Date	7. Amount Disbursed
		Subtotal This Page	
	(Only on last page of Schedule)	Total This Period	

Enter the total on line 3 on Summary Page